FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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	OMB APP	ROVAL
	OMB Number:	3235-0076
	Expires: At	Jgust 31, 1998
	Estimated average	age burden
	hours per respo	nse 16.00

SEC USE ONLY						
Prefix	Serial					
DATE RECEIVED						

		<u> </u>
•	this is an amendment and name has changed, and in	<u> </u>
	rises, Inc. common stock offe	
Filing Under (Check box(es) that	apply): X Rule 504	☐ Section 4(6) ☐ ULOE
Type of Filing: New Filing	☐ Amendment	
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requeste	d about the issuer	
	s is an amendment and name has changed, and indic	02058970
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
4010 Garner Rd.,	Riverside, CA 92501	(909) 784-6874
	erations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business I construction rel	Development, marketing and sa Lated products.	le of scaffolding and
Type of Business Organization 🗷 corporation	☐ limited partnership, already formed	Other (please specify):
☐ business trust	☐ limited partnership, to be formed	other (please specify): PROCESSE
Actual or Estimated Date of Inco Jurisdiction of Incorporation or	Orporation or Organization:  Month Year  O 9 9 9  Organization: (Enter two-letter U.S. Postal Service a  CN for Canada; FN for other foreign	
GENERAL INSTRUCTIONS		

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid  $\mathcal{OMB}$  control number.

C 1972 (2-97) 1 of

## A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Check Box(es) that Apply: 🛛 Promoter 🖾 Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)			
Bothwell, Tim		*	
Business or Residence Address (Number and Street, City, State	e, Zip Code)		
4010 Garner Rd., Riverside, Ca	1if. 92501		
Check Box(es) that Apply:   Promoter   Beneficial Owner	er K Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)  Bothwell, Jeff			
Business or Residence Address (Number and Street, City, State	e, Zip Code)	·····	
4010 Garner Rd., Riverside, Ca	lif. 92501	·	
Check Box(es) that Apply:   Promoter   Beneficial Owner	er 🛛 Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)			
Greenawalt, Michael			
Business or Residence Address (Number and Street, City, State	e, Zip Code)		
4010 Garner Rd., Riverside, Ca	lif. 92501		
Check Box(es) that Apply:	er	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)			***
DeBever, Bruce			
Business or Residence Address (Number and Street, City, Stat	e, Zip Codé)	,	•
4010 Garner Rd., Riverside, Ca	lif. 92501		
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Own	er	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)			
Heckerdorn, Charles			
Business or Residence Address (Number and Street, City, State	e, Zip Code)		
4010 Garner Rd., Riverside, Ca	lif. 92501		
Check Box(es) that Apply:	er	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)	, v		
Coltrain, Arthur Jr.		,	
Business or Residence Address (Number and Street, City, State	te, Zip Code)		<del></del>
4010 Garner Rd., Riverside, Ca	lif. 92501		
Check Box(es) that Apply:   Promoter   Beneficial Own	er	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State	te, Zip Code)		

	<u>:</u>			<b>D.</b> 11	VFURMA.	HUN ABI	JU1 OFFI	EKING			·	Vac	No
1. Has t	he issuer s	old, or do	es the issu	er intend	to sell, to	non-accre	dited inves	tors in this	offering?			. 🔯	
	Answer also in Appendix, Column 2, if filing under ULOE.  2. What is the minimum investment that will be accepted from any individual?  3. Does the offering permit joint ownership of a single unit?  4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer rigistered with the SEC and/or with a state or states, list the name of the broker or dealer. I from than five (5) persons to be listed are associated persons or such a broker or dealer, you may set forth the information for that broker or dealer only.  Il Name (Last name first, if individual)  NONE  siness or Residence Address (Number and Street, City, State, Zip Code)  une of Associated Broker or Dealer  ates in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)												
2. What		. <u>\$20</u>	,00										
2 D	.b. aff		:-:			. 0						Yes	No
J. Does	the ottent	ig permit	joint owne	ersnip of a	single uni			( ]	usban	d and	wife	only	) 🗆
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?													
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?  Answer also in Appendix, Column 2, If filing under ULOE.  2. What is the minimum investment that will be accepted from any individual?  3. Does the offering permit joint ownership of a single unit?  4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer from the five five than the broker or dealer only.  Full Name (Last name first, if individual States)  (Check "All States" or check individual States)  (AL) [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [H1] [ID] [IL] [IN] [IN] [IN] [IN] [IN] [IN] [IN] [IN													
NO	NE												
		e Address	(Number	and Street	, City, Sta	te, Zip Co	ode)	·		<del></del>			
			•				•						
Name of	Associated	Broker or	Dealer				<u> </u>						<del></del>
States in V	Which Pers	on Listed	Has Solici	ted or Int	ends to So	licit Purch	asers		-		<del></del>	<del></del>	<del></del> .
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		-							• •			(MO	
	[NE]	[NV]		[ NJ ]	[NM]			[ND]			•	[PA	-
[ R1 ]	[ SC ]	[ SD ]	[TN]	[TX]	[UT]	[ VT ]	[VA]	[WA]	[WV]	{ WI }	[WY]	[PR	}
Business c	or Residence	e Address	(Number	and Street	, City, Sta	ate, Zip Co	ode)		<u></u>				
Name of	Associated	Broker or	Dealer										
States in V	Which Pers	on Listed	Has Solic	ited or Int	ends to Sc	dicit Purch					<del></del>	··	
							idsers					[] A31	States
,				•			[DE]	[DC]	(FL)	[GA]	[HI]		
-						_					-	(MO	
					[NM]		[NC]	[ND]	(OH)			[PA	
[ RI ]	[ SC ]	[ SD ]	[TN]	[TX]	[UT]	[VT]	[VA]	{WA}	[WV]	[W1]	[WY]	[ PR	1
Full Name	e (Last nan	ne first, if	individua	1)						-			
			-										
Business of	or Residence	e Address	(Number	and Stree	t, City, Sta	ate, Zip C	ode)						
		•											
Name of	Associated	Broker or	r Dealer								<u> </u>		
States in	Which Pers	son Listed	Has Solic	ited or In	tends to So	olicit Purcl	nasers	<del></del>					<del></del>
(Check	"All State	s" or chec	ek individu	al States)									States
[AL]	[ AK ]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[ FL ]	[GA]	[ HI ]	[ ID	
[ IL ]	[ IN ]	[IA]	[ KS ]	[KY]	[LA]	[ME]	[MD]	[MA]	[ MI ]	[MN]	[MS]	[MO	
[IL] [MT] [RI]	[IN] [NE] [SC]	[NV]	[KS] [NH] [TN]	[ K Y ] [ NJ ] [ TX ]	[LA] [NM] [UT]	[ME] [NY] [VT]	[MD] [NC] [VA]	[MA] [ND] [WA]	[M1] [OH] [WV]	[MN] [OK] [WI]	[MS] [OR] [WY]	[MO [PA [PR	1

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregat Offering Pi		Amount Already Sold
	Debt	\$		\$
	Equity	<u>\$ 60,00</u>	0_	s_40,000
	☑ Common □ Preferred			
	Convertible Securities (including warrants)	\$		\$
	Partnership Interests	\$		<b>S</b>
	Other (Specify)	<b>S</b>		\$
	Total	<u>\$ 60,00</u>	0_	<u>\$ 40,000</u>
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investor		Aggregate Dollar Amount of Purchases
	Accredited Investors			\$
	Non-accredited Investors			
	Total (for filings under Rule 504 only)			; <b>\$</b>
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Type of		Dollar Amoun
	Type of offering	Security		Sold
	Rule 505			\$
	Regulation A			\$
	Rule 504			\$
	Total			\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees			<u> N.A.</u>
	Printing and Engraving Costs			§ N.A.
	Legal Fees		冱	<u>\$ 3,500</u>
	Accounting Fees			<u>s N.A.</u>
	Engineering Fees			<u> N.A.</u>
	Sales Commissions (specify finders' fees separately)			SN.A.
	Other Expenses (identify)			s_N.A.
	Total		Х	<u>\$3,500</u>

	C. OFFERING PRICE, NUMBER	OF INVESTORS, EXPENSES AND	USE OF P	ROCEEDS	3
	b. Enter the difference between the aggregate offertion 1 and total expenses furnished in response to 1 adjusted gross proceeds to the issuer."	Part C - Question 4.a. This difference	is the		<u>\$56,500.</u>
5.	Indicate below the amount of the adjusted gross prused for each of the purposes shown. If the amount estimate and check the box to the left of the estimate the adjusted gross proceeds to the issuer set forth it	nt for any purpose is not known, furni e. The total of the payments listed must	sh an equal		
		<b>,</b>	Payn Of Direc	nents to ficers, ctors, & filiates	Payments To Others
	Salaries and fees	• • • • • • • • • • • • • • • • • • • •	□ <b>s</b> 26	,500	□ \$
	Purchase of real estate	***************************************	□ <b>\$</b>		□ <b>s</b>
	Purchase, rental or leasing and installation of	machinery and equipment	□ <b>\$</b>		□ \$
	Construction or leasing of plant buildings and	facilities	□ <b>\$</b>		□ <b>s</b>
	Acquisition of other businesses (including the offering that may be used in exchange for the issuer pursuant to a merger)	assets or securities of another	<b>□ \$</b>		
	Repayment of indebtedness				
	Working capital				
	•		-		
	Other (specify):		. 🗆 🖫		LJ \$
			□ \$		□ <b>\$</b>
	Column Totals		□ <b>s</b>		□ <b>s</b>
	Total Payments Listed (column totals added)			□ <u>\$ 56</u>	5,500
_		D. FEDERAL SIGNATURE			
fc	the issuer has duly caused this notice to be signed by ollowing signature constitutes an undertaking by the issuest of its staff, the information furnished by the issuest of its staff, the information furnished by the issuest of its staff, the information furnished by the issuest of its staff, the information furnished by the issuest of its staff, the information furnished by the informatio	the undersigned duly authorized person ssuer to furnish to the U.S. Securities a	nd Exchang	e Commis	sion, upon written r
Is	suer (Print or Type)	Signature		Date	
	Bothwell Enterprises, Inc.	1 - Boulet		9	7-9-15
N	ame of Signer (Print or Type)	Title of Signer (Print or Type)			
	Tim Bothwell	President			

-ATTENTION-

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE  Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions Yes No of such rule?  See Appendix, Column 5, for state response.  The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.  The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.  The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability							
1.								
		See Appendix, Column 5, for state resp	oonse.					
2.			of any state in which this notice is filed, a notice or					
3.		rtakes to furnish to the state administrators,	upon written request, information furnished by the					
4.	limited Offering Exemption (ULOE		understands that the issuer claiming the availability					
	issuer has read this notification and ersigned duly authorized person.	knows the contents to be true and has duly	caused this notice to be signed on its behalf by the					
lssu	er (Print or Type)	Signature	Date					
Nar	ne (Print or Type)	Title (Print or Type)						

### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	Ť 2	2	3 4				5			
	to non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item1)	Number				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item1)		
G				Number of Accredited		Number of Non-Accredited			_	
State AL	Yes	No		Investors	Amount	Investors	Amount	Yes	No	
AK					3-1-11					
AZ										
AR									·	
CA										
CO	<del>                                     </del>									
СТ	<u> </u>									
DE										
DC										
FL										
GA	-									
HI										
ID	<del> </del>	<u> </u>								
IL										
IN										
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KY										
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ME		1								
MD		ļ								
MA	-									
MI										
MN	-	-								
MS	<del> </del>									
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APPENDIX

1	2 3				4 5						
	to non-a investor:	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item1)						Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
MT	105			20.00.0		Investors	ZMOGIK	103			
NE											
NV											
NH											
NJ											
NM											
NY											
NC											
ND											
ОН											
ОК											
OR											
PA											
RI											
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